Image# 27960049179

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	Un	(See instruction	_	Office use only
NAME OF COMMITTEE (in		eck if name hanged)	Example: If typying, type over the lines	12FE4M5
National Rifle	Association of Ame	rica Political	Victory Fund	
ADDRESS (number and	street) 11250 W	aples Mill Ro	oad 	
(Check if addr is changed)	ess Fairfax			VA 22030 _
	U ADDDEGO		CITY▲	STATE▲ ZIP CODE ▲
NRAPVF@nral				
			<u> </u>	
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
www.nrapvf.o	rg		<u> </u>	
			<u> </u>	
COMMITTEE'S FAX N 703-267-1159	IUMBER			
2. DATE 0.2	0 8 / Y Y Y 2	0 0 7 Y		
3. FEC IDENTIFICA	TION NUMBER		C C00053553	
4. IS THIS STATEM	IENT NEW (N)	OR	X AMENDED (A)	
I certify that I have exami	ned this Statement and to th	ne best of my know	wledge and belief it is true, correct ar	nd complete
Type or Print Name of	Treasurer Mar	y Rose Adkin	s	
Signature of Treasurer	Electronically Filed by	Mary Rose	e Adkins	Date 02 / 08 / 2007
NOTE: Submission of fa	·	•	subject the person signing this Stat	tement to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530	

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5.	TYPE OF COMMITTEE (Check One)	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the cinformation below.)	candidate
	Name of Candidate	
	Candidate Office Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
		emocratic, epublican,etc.) Party.
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated full committee.	und or party
3.	Name of Any Connected Organization or Affiliated Committee The National Rifle Association of America	.
	Mailing Address 11250 Waples Mill Road	
	FairfaxVA22	2030 _ [
	CITY▲ STATE ▲	ZIP CODE A
	Relationship Parent Organization	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock Labor Organizat	ion
	X Membership Organization Trade Association Cooperative	

	FEC Form 1	(Revised 02/2003)				Page	3
٧	Vrite or Type Comm	ittee Name					
	National Rifle	Association of	America Political Victory Fu	ınd			
7.		cords: Identify b Committee books	y name, address, (phone nun and records.	nber optional), and	d position of th	ne person in	
	Full Name						
	Mailing Address						
	Title or Position		CITY A				
		•	3 4			3322	-
				Telephone numl	ber		
3.	Treasurer: List name and addr	t the name and ac ress of any design	Idress (phone number optionated agent (e.g., assistant tre	onal) of the treasurer easurer).	of the commi	ittee; and the	
	Full Name of Treasurer	Mary Rose A	dkins				
	Mailing Address		11250 Waples Mill Road				
			Fairfax		_VA	22030	
	Title or Position	1	CITY A		STATE	ZIP CODE	A
		Treasurer		Telephone numl	703		1155
	Full Name of Designated Agent	Ray Smith					
Mailing Address			11250 Waples Mill Ro	pad			
			Editor			00000	
			Fairfax			22030_	
	Title or Position \	•	CITY A		STATE A	ZIP CODE	A
		Assistant Treasu	ırer	Telephone numl	703	267	1152

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9.	Banks or Other Depositorie safety deposit boxes or mainta	ains funds.	ls accounts, rents
	Name of Bank, Depository, etc	0.	
	Wach	ovia Bank, N.A.	
	Mailing Address	10501 Main Street	
		Fairfax VA	22030 _
		CITY △ STATE △	ZIP CODE △

Membership Organization

FEC Form 1 (Revi	ised 1/2001)		Page 5 / 11
Banks or Other Depositions safety deposit boxes or managed Name of Bank, Depositor	naintains funds.		accounts, rents
Br	ranch Banking and Trust Company		
Mailing Address	11230 Waples Mill Road		
		1 1 1 1 1 1 1 1	
	Fairfax	VA L	22030
	CITY 🛆	STATE △	ZIP CODE 🛆
Name of Any Connecte	ed Organization or Affiliated Committee	[ADDITIONAL]
Mailing Address			
	CITY▲	STATE ≜	ZIP CODE
Relationship			
Type of Connected Orga	anization:		
Corporation	Corporation w/o Capital Stock	Labor Org	anization

Trade Association

Cooperative

Designated Agent		[ADDITIONAL]
Full Name		
Title or Position ♥	CITY A	
	Te	elephone number = =

Corporation

Membership Organization

FEC Form 1 (Revised	1/2001)	Page 7 / 11
Banks or Other Depositorie safety deposit boxes or mainta Name of Bank, Depository, etc	tains funds.	inds, holds accounts, rents
Bank	of America	
Mailing Address	P.O. Box 25118	
	Tampa FL	33622 _
	CITY A STATE A	ZIP CODE △
Name of Any Connected O	Organization or Affiliated Committee	[ADDITIONAL]
Mailing Address		
gg.		
	CITY STATE.	▲ ZIP CODE ▲
Relationship		
Type of Connected Organiza	ation:	

Corporation w/o Capital Stock

Trade Association

Labor Organization

Cooperative

Designated Agent		1	[ADDITIONAL]
Full Name LILL Address L			
-			
Title or Position ♥	CITY A	STATE▲ elephone number	ZIP CODE A

Corporation

Membership Organization

FEC Form 1 ((Revised 1/	/2001)				Page 9 / 11
Banks or Other Dep safety deposit boxes Name of Bank, Depo	or maintai	ns funds.	ks or other depositorie	s in which the committe	ee deposits funds, ho	lds accounts, rents
	Bank o	of the West				
Mailing Address		224 Box E	Butte Avenue			
		Alliance			NE	69301
			CITY △		STATE △	ZIP CODE 🛆
Name of Any Con	nected Org	ganization or A	ffiliated Committee			[ADDITIONAL]
	1 1 1					
Mailing Address						
			CITY		STATE A	ZIP CODE A
Relationship						
Type of Connected	Organizati	on:				

Corporation w/o Capital Stock

Trade Association

Labor Organization

Cooperative

Designated Agent			[ADDITIONAL]
Full Name			
Title or Position ▼	CITY &	STATE▲ Telephone number	ZIP CODE A

Image# 27960049189

Form/Schedule:**F1A**Transaction ID:

February 8, 2007 Federal Election Commission Attn: Karen Trainer 999 E Street, NW Washington, DC 20463 ID# C00053553 RE: Amended Statement of Organization Dear Ms. Trainer: This amendment to our Statement of Organization changes the e-mail address for this committee. Should you have any questions, I can be reached at 703-2-67-1155. Sincerely, Mary Rose Adkins Treasurer